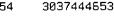
3037444653

| \ nct   | PART B - FEE(S) TRA  Complete and send this form, together with applicable sec(s), to: Mail  0 3 2005  or Fax  NSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLISheropriate. As further correspondence including the Patent, advance orders and notification injuried by the corrected below or directed otherwise in Block 1, by (a specifying a new DEAST CORRESPONDENCE ADDRESS (Note: Use Block 1 for my change of address)  26683  7590  09/23/2005  THE GATES CORPORATION   |   |   |   |  | Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 ICATION FEB (if required). Blocks I through 5 should be completed where not maintenance fees will be mailed to the current correspondence address as correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of finaling or transmission. |  |   |   |  |  |
|---|---|---|---|---|--|--|--|---|---|--|--|
|   | IP LAW DEPT. 10-A3  |   |   |   | States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FRE address above, or being facsimile |  |  |   |   |  |  |
|   | 155) WEWATTA STREET<br>DENVER, CO 80202<br>5 NAGUYEN2 00000014 070475 10005083  |   |   |   | transmitted  | Cartificate of Mailing or Transmission.  I hereby contify that this Fee(s) Transmission is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FRE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's some)  |  |   |   |  |  |
| 10/03/2005  |   |   |   |   |  | <b>Sanja</b>   | _Falle   | r -   | (Delanta amany  |  |  |
|   |   |   |   | Son   |  | a faller   |  | 4   | (Signeture)   |  |  |
| 01 FC:1501  |   |   |   |   |  | <u> </u>   | MAR)   | 3, 3  | 005   | (Date)   |  |
| 02 FC:1504  | APPLICATION WE, DR PRING DATE   |   | IJRST NAMED INVE  |   | INVENTOR;  |  | ATTORNEY   | DOCKET NO.  | CONFIRM/  | CHOM NO:   |  |
|   | 10/005,083  |   | Frank Sch   |   | _  | Q01-035A   |  | 8582  |   |  |  |
| ז   | TITLE OF INVENTION: SP  | 12/04/2001<br>INDLE SLEEVE WITH TE  | RANSPONDER  |   |  |  |  |   |   | ·  |  |
| ſ   | APPLN, TYPE   | SMALL ENTITY  | ISSUB 17  | ā.B   | PUBLICATION FEB  |  | TOTAL FRE(S) DUR                                       |   |   | DATE DUB   |  |
| L   | nonprovisional  | NO  | \$1400  | )   | \$300  | \$300  |  | \$1700  |   | 3/2005   |  |
| Г   | RXAMINER  |   | ART UNIT  |   | CLASSISUBCL  | SUBCLA9S   |  |   |   |  |  |
| l   | KIM, AHSHIK   |   | 287/5   |   | 235-37500  | 10   |  |   |   |  |  |
|   |   |   |   |   | the an the shieut Bost page I  |  | et   |   |   |  |  |
| į   | I. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicst PTO/SB/47; Rev 03-02 c  | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent atterneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered atterney or agent) and the names of up to 2 registered patent atterneys or agents. If no name is listed, no name will be printed. |   |   |  |  |  |   |   |  |  |
| •   | 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has liften filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  |   |   |   |  |  |  |   |   |  |  |
|   | (A) NAME OF ASSIGNEE  THE GATES CORPORATION  1551 Wewatta Street  Denver CO 80202 USA  Please check the appropriate assignee company or categories (will not be printed on the patent):   Individual   Macorporation or other private group entity   Government   |   |   |   |  |  |  |   |   | ☐ Government   |  |
| 4a. The following (secis) are enclosed:  4b. Payment of Fee(s):                   |   |   |   |   |  |  |  |   |   |  |  |
|   | ☐ Issue Fee ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PIO-2038 is attached.   |   |   |   |  |  |  |   |   |  |  |
|   |   |   |   |   |  | ter is begative outhorized by charge the required fee(s), or credit any overpayment, to  |  |   |   |  |  |
| Advance Order - # of Copies 0 Deposit Account Number 07-0475 (enclose an extra co |   |   |   |   |  |  |  | a copy of this i  | erm).   |  |  |
|   | S. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue See and Publication Fee (if any) or to re-apply any previously haid issue fee in the application identified above.  NOTE: The Issue Fee and Publication Fee-(if required) will not be necessed from anyone other than the applicant; a registered attorney or agent; or the assigned or other party in interest as shown by the records of the Taylor States Partial and Trademurk Office. |   |   |   |  |  |  |   |   |  |  |
|   | NOTE: The lame Fee and I interest as shown by the rec   | reflection Fee (if required)  | will not be neceptated and Irademan   | d from anyon<br>k Office.   | o other than the app   | ilicant; e rej   | gistered attorn  | ery or agent; o   | or the assigned   | or other party in  |  |
|   | Authorized Signature  | <del></del>   | •   | Date  | 2et. 6   | <b>20</b><br>42 183  |  |   |   |  |  |
|   | Typed or printed name   | Jeffrey Th  | urnau   |   |  |  |  |   |   | PT() to process)   |  |
|   | This collection of information application. Confidents submitting the completed a this form and/or suggestion. Box 1450, Alexandria, Virginia 2231.   | on is required by 37 CFR 1.  lity is governed by 35 U.S.  specification form to the USP  is for reducing this burden,  gamia 22313-1450. DO NO  1450.   | 31 1. The information 122 and 37 CFR TO. Time will ver should be sent to de SEND FEES OIL | im is required<br>t 1.14. This co<br>y depending to<br>he Chief Infor<br>COMPLETE | to obtain or reading the cition is estimated pon the individual mallon Officer, U.S. FORMS TO THE  | n benefit by<br>d to take 12<br>case. Any<br>i. Patent en<br>is ADDRE:   | l minutes to comments on<br>d Trademark<br>SS. SEND TO | omplete, incl<br>the amount of<br>Office, U.S. 1<br>Commissio | ding gathering of time you reg Department of ner for Patents, | in preparing, and nire to complete Commerce, P.O. P.O. Box 1450, |  |
|   | Under the Paperwork Rodu  | ction Act of 1995, no person  | as are required to n  | estionq to 11 co  | llection of informat   | ion unless i   | t displays a v   | and OMR con   | urn) number.  |  |  |





## FAX COVER SHEET

Date:

October 3, 2005

TO:

Box Issue Fee

Fax:

571-273-2885

From:

Jeffrey Thurnau

Phone:

(303) 744-4743

Patent Counsel

Fax:

(303) 744-4653

Number of pages including cover sheet: 3

SERIAL NO.: 10/005,083 DOCKET NO.: 001-035A FILED: DECEMBER 4, 2001

TITLE: SPINDLE SLEEVE WITH TRANSPONDER

RESPONSE TO: Box ISSUE FEE

ATTACHMENTS INCLUDE: PTOL - 85 Part B - Fee(s) Transmittal

and Deposit Account Authorization